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=> d his

     (FILE 'HOME' ENTERED AT 14:53:15 ON 05 AUG 2003)

     FILE 'MEDLINE' ENTERED AT 14:53:22 ON 05 AUG 2003
               E MORTON D L/AU
L1          528 S E3
L2            0 S MHC AND L1
L3           19 S VIRUS AND L1
L4         2766 S PLURIPOTENT
L5            0 S L1 AND L4
L6            0 S ALLOTYPE? AND L1
L7            0 S B-7 AND L1
L8            0 S ENVELOPED VIRUSES AND L1
L9            0 S ENVELOPED AND L1
L10           0 S ENVELOP? AND L1
L11           0 S HERPES AND L1
L12           0 S HIV AND L1
L13           0 S ALLOTYPE AND L1
L14           1 S ALLOANTIGEN AND L1
L15           0 S ALLOTYPES AND L1
L16       24581 S MAJOR HISTOCOMPATIBILITY
L17           2 S L1 AND L16
L18        3210 S ALLOANTIGENS
L19           2 S L1 AND L18
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> d l17 1-2

L17 ANSWER 1 OF 2 MEDLINE on STN
AN 92224200 MEDLINE
DN 92224200 PubMed ID: 1373343
TI Cytotoxic T cell lines recognize autologous and allogeneic melanomas with shared or cross-reactive HLA-A.
AU Hayashi Y; Hoon D S; Park M S; Terasaki P I; **Morton D L**
CS John Wayne Institute For Cancer Treatment and Research, Santa Monica, CA 90404.
NC CA12582 (NCI)
SO CANCER IMMUNOLOGY, IMMUNOTHERAPY, (1992) 34 (6) 419-23.
Journal code: 8605732. ISSN: 0340-7004.
CY GERMANY: Germany, Federal Republic of
DT Journal; Article; (JOURNAL ARTICLE)
LA English
FS Priority Journals
EM 199205
ED Entered STN: 19920607
Last Updated on STN: 19960129
Entered Medline: 19920521

L17 ANSWER 2 OF 2 MEDLINE on STN
AN 92005513 MEDLINE
DN 92005513 PubMed ID: 1913686
TI Interleukin 4 alone and with gamma-interferon or alpha-tumor necrosis factor inhibits cell growth and modulates cell surface antigens on human renal cell carcinomas.
AU Hoon D S; Okun E; Banez M; Irie R F; **Morton D L**
CS John Wayne Cancer Institute, Santa Monica, California 90404.
NC CA 12582 (NCI)
CA 30647 (NCI)
CA 42396 (NCI)
SO CANCER RESEARCH, (1991 Oct 15) 51 (20) 5687-93.
Journal code: 2984705R. ISSN: 0008-5472.
CY United States
DT Journal; Article; (JOURNAL ARTICLE)
LA English
FS Priority Journals
EM 199111
ED Entered STN: 19920124
Last Updated on STN: 19980206
Entered Medline: 19911113

=> d l17 1-2 ab

L17 ANSWER 1 OF 2 MEDLINE on STN
AB Cytotoxic T lymphocytes (CTL), CD3+, alpha/beta T-cell-receptor-positive, are important effector cells with specific immunity in melanoma patients. The establishment and expansion in vitro of CTL of a specific phenotype to tumor cells strongly depends on the method of activation and sensitization with tumor cells. We generated CD3+ CTL lines to melanoma by co-culturing peripheral blood lymphocytes with autologous irradiated melanoma cells and repetitive stimulation with high-dose interleukin-4 in a "cocktail" culture medium. CTL lines were investigated for their specificity to kill autologous and allogeneic melanoma. Histocompatibility locus antigen (HLA) class I (A, B) molecules are important restrictive recognition antigens for CTL. Although these antigens are highly polymorphic, they can share a similar immunogenic molecular epitope(s) and can be immunologically cross-reactive. The CTL lines generated were found to kill not only autologous melanoma, but also allogeneic melanomas having

class I HLA-A antigens shared or "cross-reactive" with autologous HLA-A. These CTL lines were poor killers of melanomas bearing non-shared or non-cross-reactive HLA-A. Cold-target inhibition assays demonstrated this CTL cross-reactivity to allogeneic melanoma specificity. Epstein-Barr-virus-transformed autologous and allogeneic B lymphoblastoid cell lines failed to block autologous melanoma killing, indicating that CTL were not recognizing **major histocompatibility** complex antigens, serum proteins or culture medium products as the primary target antigen. HLA-A2 was the major shared HLA-A antigen recognized by CTL lines on the melanoma lines studied. CTL lines also recognized shared HLA-A11 and A24 on allogeneic melanoma. There were no CTL lines showing restriction to HLA-B. These results suggest that common tumor-associated antigens are present on melanomas and are recognized in association with distinct HLA-A epitopes by CTL.

L17 ANSWER 2 OF 2 MEDLINE on STN

AB Immune cytokines have been shown to play important roles in regulating immune cell functions as well as neoplastic cells. Interleukin-4 (IL4), primarily known as a B-cell growth factor, can also activate and differentiate other immune cells. This cytokine has recently been shown to have immunotherapeutic benefit in tumor-bearing hosts. The present study assessed the effect on human renal cell carcinoma cell lines of recombinant IL4 alone and in combination with recombinant gamma-interferon (IFN) or recombinant alpha-tumor necrosis factor (TNF). IL4 inhibited cell growth of all lines at 250-500 units/ml in a differential manner. Expression of IL4 receptors was demonstrated on renal cell carcinomas. Overall, IFN (500 units/ml) alone inhibited cell growth; however, TNF (500 units/ml) was not as strong an inhibitor. When IL4 was combined with IFN or TNF there was a significant augmentation of cell growth inhibition and modulation of cell morphology of the cell lines. Tumor-associated ganglioside antigens (NeuAc alpha 2-3Gal beta 1-4Glc beta 1-1'Cer, NeuAc alpha 2-8NeuAc alpha 2-3Gal beta 1-4Glc beta 1-1'Cer, GalNAc beta 1-4 (NeuAc alpha 2-3)Gal beta 1-4Glc beta 1-1'Cer, and GalNAc beta 1-4(NeuAc alpha 2-8NeuAc alpha 2-3)Gal beta 1-4Glc beta 1-1'Cer) HLA class I, HLA-DR, and beta 2-microglobulin on the cell surface of renal cancer lines were assessed by flow cytometry and radiometric binding assay. IL4 alone or in combination with other cytokines modulated HLA class I and HLA-DR expression. IL4 and IFN consistently enhanced NeuAc alpha 2-8NeuAc alpha 2-3Gal beta 1-4Glc beta 1-1'Cer and GalNAc beta 1-4(NeuAc alpha 2-8NeuAc alpha 2-3)Gal beta 1-4Glc beta 1-1'Cer expression on individual cell lines. The study demonstrated that IL4 alone or in combination with other cytokines can significantly inhibit growth, and modulate the expression of surface **major histocompatibility** and tumor-associated antigens of renal cell carcinomas.

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=> s alloantigens
L18        3210 ALLOANTIGENS

=> s l1 and l18
L19           2 L1 AND L18

=> d l19 1-2 all

L19  ANSWER 1 OF 2     MEDLINE on STN
AN   90055027     MEDLINE
DN   90055027   PubMed ID: 2683997
TI   Immunosuppression by melanoma cells as a factor in the generation of
     metastatic disease.
AU   Cochran A J; Wen D R; Farzad Z; Stene M A; McBride W; Lana A M; Hoon D S;
     Morton D L
CS   Department of Pathology, University of California, Los Angeles 90024-1732.
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NC CA 29605 (NCI)
CA 29938 (NCI)
CA 43658 (NCI)
SO ANTICANCER RESEARCH, (1989 Jul-Aug) 9 (4) 859-64. Ref: 59
Journal code: 8102988. ISSN: 0250-7005.
CY Greece
DT Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)
LA English
FS Priority Journals
EM 198912
ED Entered STN: 19900328
Last Updated on STN: 19970203
Entered Medline: 19891208
AB Studies of the regional nodes (RLN) of melanoma patients, using immunohistology with anti-S-100 protein and monoclonal antibodies have shown occult tumor cells (OTC) in nodes ostensibly tumor-free by H&E staining. OTC were demonstrated in 14% of Stage I patients, mainly those with deep, thick primaries and 30% of Stage II patients, mainly those with at least 3 tumor-positive nodes on H&E. The nodes containing OTC are those nearest to tumor on the direct lymphatic pathway (dye studies). Parallel studies show nodes in the same position to be immune suppressed (histology, immunohistology, response to mitogens, **alloantigens** and lymphokines) and to contain many suppressor T cells (Con-A). Melanoma-derived materials (gangliosides, prostaglandins, lipoprotein antigens) downregulate lymphocyte and macrophage functions, providing a possible mechanism for the suppressed function of nodes near tumor, a suppression that may facilitate tumor cells as evidenced by the survival of OTC.
CT Check Tags: Human; In Vitro; Support, Non-U.S. Gov't; Support, U.S. Gov't, P.H.S.
*Immune Tolerance
Lymph Nodes: IM, immunology
Lymph Nodes: PA, pathology
Lymphocyte Activation
Lymphocytes: IM, immunology
*Melanoma: IM, immunology
Melanoma: PA, pathology
*Neoplasm Metastasis: IM, immunology
Neoplasm Staging

L19 ANSWER 2 OF 2 MEDLINE on STN
AN 70192138 MEDLINE
DN 70192138 PubMed ID: 5267515
TI In vitro detection of guinea pig **alloantigens** by the macrophage-inhibition technique.
AU Malmgren R A; Holmes E C; **Morton D L**; Yee C L; Marrone J; Myers M W
SO TRANSPLANTATION, (1969 Oct) 8 (4) 485-9.
Journal code: 0132144. ISSN: 0041-1337.
CY United States
DT Journal; Article; (JOURNAL ARTICLE)
LA English
FS Priority Journals
EM 197007
ED Entered STN: 19900101
Last Updated on STN: 19900101
Entered Medline: 19700709
CT Check Tags: Animal; Female
*Cell Movement
Exudates and Transudates: CY, cytology

Guinea Pigs
Histocompatibility Testing

d 13 1-19 ti

L3 ANSWER 1 OF 19 MEDLINE on STN
TI **Virus** particles in tissue cultures of a human liposarcoma.

L3 ANSWER 2 OF 19 MEDLINE on STN
TI Molecular cloning of a human monoclonal antibody reactive to ganglioside GM3 antigen on human cancers.

L3 ANSWER 3 OF 19 MEDLINE on STN
TI Cytotoxic T cell lines recognize autologous and allogeneic melanomas with shared or cross-reactive HLA-A.

L3 ANSWER 4 OF 19 MEDLINE on STN
TI Regression of cutaneous metastatic melanoma by intralesional injection with human monoclonal antibody to ganglioside GD2.

L3 ANSWER 5 OF 19 MEDLINE on STN
TI Establishment of paired tumor cells and autologous **virus** -transformed cell lines to define humoral immune responses in melanoma and sarcoma patients.

L3 ANSWER 6 OF 19 MEDLINE on STN
TI Restoration of immunocompetency by lymphocyte transfusion.

L3 ANSWER 7 OF 19 MEDLINE on STN
TI Evidence for a **virus** in human sarcomas.

L3 ANSWER 8 OF 19 MEDLINE on STN
TI Delayed cutaneous hypersensitivity and peripheral lymphocyte counts in patients with advanced cancer.

L3 ANSWER 9 OF 19 MEDLINE on STN
TI Immunologic abnormalities in head and neck cancer.

L3 ANSWER 10 OF 19 MEDLINE on STN
TI Viral and immunologic studies of human neoplasms.

L3 ANSWER 11 OF 19 MEDLINE on STN
TI Immunologic and virologic studies of a nonproducer tumor induced by murine sarcoma **virus** (Harvey).

L3 ANSWER 12 OF 19 MEDLINE on STN
TI Demonstration by the antiglobulin consumption test with murine antisera of common antigens in tissues infected with the mammary tumor **virus** from different mouse strains.

L3 ANSWER 13 OF 19 MEDLINE on STN
TI Immunologic studies of human sarcomas: Additional evidence suggesting an associated sarcoma **virus**.

L3 ANSWER 14 OF 19 MEDLINE on STN
TI Immunologic and **virus** studies with human sarcomas.

L3 ANSWER 15 OF 19 MEDLINE on STN
TI Detection of antibodies against the mammary tumor **virus** with the antiglobulin consumption test.

L3 ANSWER 16 OF 19 MEDLINE on STN
TI Acquired immunological tolerance and carcinogenesis by the mammary tumor **virus**. II. Immune responses influencing growth of spontaneous mammary adenocarcinomas.

L3 ANSWER 17 OF 19 MEDLINE on STN
TI Acquired immunological tolerance and carcinogenesis by the mammary tumor **virus**. I. Influence of neonatal infection with the mammary tumor **virus** on the growth of spontaneous mammary adenocarcinomas.

L3 ANSWER 18 OF 19 MEDLINE on STN
TI Demonstration of tumor-specific immunity against antigens unrelated to the mammary tumor **virus** in spontaneous mammary adenocarcinomas.

L3 ANSWER 19 OF 19 MEDLINE on STN
TI Acquired immunologic tolerance and carcinogenesis by the mammary tumor **virus**.